DMPA-SC training for health workers

Reinjection timing recommendations for DMPA-SC

PATH developed this fact sheet in response to questions about the recommended reinjection time frames for subcutaneous DMPA (DMPA-SC, brand name Sayana® Press). This document explains why information in the PATH-produced training materials differs from the manufacturer recommendations, summarizes the World Health Organization (WHO) recommendations, and addresses why the same reinjection window should be used for clients living with HIV.

MANUFACTURER RECOMMENDATIONS

All depot medroxyprogesterone acetate (DMPA) products work in much the same way, but different manufacturers label their products with slightly differing time frames for reinjection, depending on how their product tests were structured.

- Sayana Press is labeled for injection every 13 weeks, +/- 1 week.[1]
    - Depo-Provera (Pfizer Inc.'s brand of DMPA intramuscular (DMPA-IM)) is labeled for injection every 12 weeks, and a maximum of five days "late".[2]
    - Other brands of DMPA may be labeled with slightly different reinjection time frames, depending on the manufacturer.

WORLD HEALTH ORGANIZATION RECOMMENDATIONS

These differences in manufacturers' recommended reinjection time frames for DMPA products can cause confusion for health providers and women using the product. Specifically:

- Because the recommended reinjection time frames differ slightly from product to product, the timing of reinjection visits can be confusing for providers who deliver more than one brand of DMPA.
- Sometimes it can be difficult for women to return for reinjection within a very specific time frame. A woman who misses her exact reinjection window may be denied her DMPA injection by the health provider until pregnancy can be ruled out. This may cause a lapse in her preferred contraceptive coverage as well be inconvenient for her.

To address this confusion, the World Health Organization (WHO) conducted an extensive review of the timeframe that DMPA, including DMPA-SC, remains effective in the body. This research resulted in WHO's harmonized reinjection time frame and grace period recommendations for all DMPA products, as outlined in the box below.[3,4]

World Health Organization reinjection recommendations for all DMPA products

- DMPA reinjections should be administered every 3 months (13 weeks).
- Reinjections can be given up to 2 weeks early.
- Reinjections can be given up to 4 weeks late without requiring additional contraceptive protection.

While DMPA can be given up to 4 weeks late if necessary, this does not mean that the regular DMPA injection interval can be extended by 4 weeks. It is only intended as a back-up for women who are not able to make their 13-week appointment.

PATH'S DMPA-SC TRAINING MATERIALS

In support of WHO's efforts to reduce confusion or gaps in contraceptive coverage, PATH's DMPA-SC training materials reflect these harmonized DMPA reinjection guidelines. These materials include clinical guidance on reinjection timing and are available in both English and French.

SPECIAL CONSIDERATIONS FOR CLIENTS LIVING WITH HIV

Clients living with HIV, including those using antiretroviral therapies (ARTs), can use DMPA on the same schedule as any other client. WHO, as well as Pfizer Inc. (the manufacturer of Depo-Provera and Sayana Press) make no special comments regarding clients living with HIV or using ARTs in their recommendations on reinjection timing.[1,2,3] Furthermore, the available evidence indicates that DMPA potency is not reduced by ARTs, and that DMPA does not interfere with the effectiveness of ARTs.[5]

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[1] Sayana Press entry. The electronic Medicines Compendium (eMC) website. Available at: http://www.medicines.org.uk/emc/medicine/27798/SPC/SAYANA+PRESS+104+mg+0.65+ml+suspension+for+injection/#CLINICAL_PARTS. Accessed: November 26, 2014.

[2] Depo-Provera entry. The electronic Medicines Compendium (eMC) website. Available at: http://www.medicines.org.uk/emc/medicine/11121/SPC/DepoProvera+150mg+ml+Injection#CLINICAL_PARTS. Accessed: November 26, 2014.

[3] World Health Organization (WHO). *Selected practice recommendations for contraceptive use*. Geneva: WHO; 2004. Available at: www.who.int/reproductivehealth/publications/family_planning/9241562846index/en/.

[4] World Health Organization (WHO). *Selected practice recommendations for contraceptive use: 2008 update*. Geneva: WHO; 2008. Available at: http://whqlibdoc.who.int/hq/2008/WHO_RHR_08.17_eng.pdf?ua=1.

[5] US Agency for International Development (USAID). *Technical Issue Brief: Drug Interactions Between Hormonal Contraceptive Methods and Anti-Retroviral Medications Used to Treat HIV.* Washington, DC: USAID; 2014. Available at: http://www.usaid.gov/sites/default/files/documents/1864/HC_ART-Brief.pdf